



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Douglas M. Duncan
County Executive

MEMORANDUM

June 18, 2002

TO: Douglas M. Duncan, County Executive
Steven Silverman, County Council President

FROM: Corinne Stevens, Acting Director

SUBJECT: Report on the Needs of Montgomery County's Low Income Seniors

The needs of Montgomery County's low income seniors highlighted by this report are consistent with concerns we have heard from seniors, family members, and professionals working with older adults from both the private and non-profit sectors. Adequate transportation, affordable independent and assisted living facilities, affordable home care, access to health care including dental and mental health services, and opportunities for continued social engagement are services at the heart of a community's responsibility to its older members.

Over the last eight years, significant increases have been made to the budgets of senior programs with most of the funds targeted for low-income seniors. To expand access to senior transportation, \$1.4M was added to the Call'N'Ride Program, the Connect-A-Ride Program of the Jewish Council for the Aging was developed, funds for escorted transportation have been provided and the fare for the Ride-On bus was reduced to \$.50 at all times for seniors. To increase the supply of affordable senior housing, \$3M was earmarked in the Montgomery Housing Initiative for the construction of affordable senior housing. We are the only county in Maryland that offers dental care for low-income seniors and \$350,000 has been added to this program during the last eight years. Specialized mental health services for seniors such as outreach and short term treatment, peer counseling, and bilingual mental health services for Hispanic seniors have also been initiated.

However, despite these funding increases the needs are great. This report reminds us that about 16,800 seniors age 75 and older with annual incomes of \$25,000 or less reside in our County. An estimated 12,600 of these seniors live alone which places them at increased risk for many health and social problems. The diversity of our senior population has grown and with that growth comes the need for more bilingual personnel, translated materials and services that are consistently delivered in a culturally competent manner.

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I extend my thanks and appreciation to the volunteer members of the Advisory Board, the faculty of the Center for Health Program Development and Management at the University of Maryland, Baltimore County, and the staff of the Department of Health and Human Services for their collaborative efforts in producing this report. I hope the findings of this report will assist us in our efforts as concerned citizens, advocates, service providers and policy-makers to assure the protection of and highest possible quality of life for our vulnerable elders.

CS:jjk

Attachment